Board of Registered Nursing



Strategic Plan

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MISSION STATEMENT

Protect the health and safety of consumers and promote quality registered nursing care in the State of California. To accomplish this we will:

- Establish and uphold competency standards, provide guidance and interpretation, prevent patient harm, and intervene with discipline and rehabilitation.
- Serve the public in a customer-oriented, well-managed, and respectful manner.
- Provide employees with the opportunity for satisfying work in an atmosphere of trust, shared commitment, and valuing of diversity and individuals differences.

CORE VALUES

QUALITY...

Excel in delivering accessible, effective services. Exceed customer expectations. Continually improve and evaluate performance.

COMMITMENT...

Demonstrate responsiveness, motivation, and dedication in all endeavors. Take ownership and responsibility and be accountable for the public's trust. Act in a conscientious and caring manner. Value diversity. Advocate for health care consumer safety.

COLLABORATION...

Work in a cooperative, respectful, and courteous spirit. Foster open communication externally and internally. Promote teamwork, and act with sensitivity to the needs of others.

VISION...

Recognize and grasp the opportunity to thrive as the world changes. Anticipate and use new technology to succeed. Value innovation and creativity. Take a leadership role in shaping future trends.

GOALS AND OBJECTIVES

Goal A: Maximize effectiveness in consumer protection and customer service.

Be responsive to customers' needs for improved services, consumer protection, and public outreach. Evaluate BRN effectiveness in terms of quality of outcomes, customer satisfaction, timeliness, efficiency, and other key measures.

Objective A1: Identify customer expectations for services and meet or exceed them.

Objective A2: Increase public access to services, increase consumer awareness of BRN services,

and expand public outreach and educational efforts.

Objective A3: Modify and improve outreach and public service efforts to

address the increasing diversity and changing needs of the population (e.g., aging population, increased diversity of

language and culture).

Objective A4: Increase program effectiveness and innovation including use of effective

technology.

Objective A5: Evaluate effectiveness of all BRN programs on an ongoing basis through a

meaningful performance measurement system, including automated data

collection and analysis.

Objective A6: Coordinate activities with other governmental agencies to improve consumer

protection and services.

Objective A7: Plan and allocate resources to effectively fulfill mission.

Goal B: Create a work environment that promotes employee success in order to better serve the public.

Recognize that human resources are key to the success of the BRN in fulfilling its mission. To that end, create a well-managed organization that fosters employee competence, initiative, innovation, achievement and job satisfaction. Create an environment of trust, and value diversity and individual differences.

Objective B1: Develop staff at all levels to allow them to succeed through training, cross-

training, coaching, mentoring, communicating expectations, providing

feedback, and recognizing achievement.

Objective B2: Continually improve and evaluate leadership and managerial skills of managers

and supervisors.

Objective B3: Increase internal communication vertically, horizontally, cross-functionally, and

geographically.

Objective B4: Create a physical environment that is supportive of employee productivity and

satisfaction.

Objective B5: Establish organizational principles and core values which create a sense of

purpose, inspire commitment from staff, contribute to higher morale, and foster

outstanding public service.

Objective B6: Continue to evaluate the internal organizational structure to ensure that it serves

the mission and goals.

Goal C: Take a proactive leadership role in structuring 21st century health care related to registered nursing and advanced practice nursing.

Research has established that the quality of nursing care has a direct impact on public health, safety, and well-being. In the changing health care environment, the BRN must advocate for consumers by promoting the significance of the role of RNs in providing quality patient care.

Objective C1: Promote a safe working environment to enhance patient protection and continuity

of care.

Objective C2: Actively participate in shaping health care policy on behalf of consumers of

nursing services.

Objective C3: Ensure that RNs are competently prepared for their role in health care delivery.

Objective C4: Educate the public, agencies, and other health care workers on the varied roles,

practices, and responsibilities of RNs.

Objective C5: Collect and analyze nursing data on a continuous basis, identify key trends and

issues from the data, and use the results to set policy and to act in the public's

interest.

Objective C6: Continually review and update statutes and regulations to improve public

protection and to eliminate unnecessary regulatory burden.

Objective C7: Identify, monitor, and act on legislative and regulatory trends.

Objective C8: Plan for and implement new legislation affecting the BRN.

Goal D: Implement the Governor's Nurse Workforce Initiative in partnership with other State agencies.

The Governor has directed the BRN and other State agencies to take action to increase the number of RNs in California in light of the growing nursing shortage. California ranks next to last in the U. S. for its per capita number of RNs. There must be an adequate supply of qualified RNs in order to protect the health and safety of consumers and to promote quality nursing care. The BRN will work to accomplish the following components of the Nurse Workforce Initiative.

Objective D1: Participate in creating funding mechanisms to increase the capacity for nursing

school programs to educate additional RNs at entry and advanced levels to meet

the need for additional RNs at all levels, including additional faculty.

Objective D2: Facilitate approval of new and expanding nursing school programs that are

qualified to educate competent RNs.

Objective D3: Lead efforts to reform nursing education by eliminating artificial barriers to

admission and completion of programs, standardizing curricula, and creating

greater articulation between programs.

Objective D4: Partner with public and private entities to facilitate expanded opportunities for

post-licensure preceptorships and training.

Objective D5: Work with other state agencies to identify needs for workplace reforms and to

identify and reward demonstration projects and best practices in this area.

Objective D6: Conduct research related to nursing workforce issues including surveys of current

RNs, inactive RNs, and employers.

Objective D7: Convene panels of experts on nursing workforce and education issues.

Objective D8: Work with other agencies to conduct an outreach campaign to recruit future RNs,

encourage re-entry of inactive RNs, retain current RNs, and to enlist the

assistance of current RNs in recruiting future RNs.

EXECUTIVE SUMMARY

Strategic planning is an ongoing process at the Board that started in 1994, and the plan continues to be implemented and to evolve as new issues arise. Staff have participated in working committees to implement the objectives set out in the strategic plan, and the Board members and management team continue to regularly review and update the plan.

The Board contracted with experts in strategic planning (The Results Group) to guide the initial process in 1994. The contractor structured an objective evaluation process, which included the following elements:

- Involvement of a representative task force of staff, management, and Board Members.
- External surveys of all key "stakeholders" or customers to determine current satisfaction with Board services and needs and expectations for improvement.
- Internal survey of employee satisfaction to create an effective work environment to serve the public.
- Environmental scan of trends and factors for which the Board must prepare.
- Identification of strengths, weaknesses, opportunities, and threats facing the Board.
- Development of mission/vision, core values, goals, objectives, and strategies.
- Performance measures as reflected in the Board's Report to the Joint Legislative Sunset Review Committee, which was approved in 2003, and in annual reports of accomplishments by sub-committees of the Board.

The Board's strategic plan provides a dynamic framework to achieve the following:

- 1.) Anticipate and prepare for future trends and issues affecting nursing regulation.
- 2.) Set a direction for effective and responsive service to the public.
- 3.) Inspire and guide employees and stakeholders.
- 4.) Plan allocation of resources to meet primary goals.

DESCRIPTION OF BOARD

Board Mandate

The Board of Registered Nursing regulates the practice of registered nursing and certified advanced practice nursing in order to protect the public health, safety, and welfare. The Board exists to protect the health and safety of consumers and to promote quality registered nursing care in California. This mission is accomplished by the following mandated activities:

- Establish and enforce sound licensing standards.
- Prosecute violations of the Nursing Practice Act through an effective enforcement program.
- Intervene promptly with chemically dependent or mentally ill nurses through the diversion program.
- Establish and enforce educational standards in nursing school programs.
- Promote continuing competence of nurses.
- Educate the public and interpret the Nursing Practice Act.

The Nursing Practice Act is the body of California law that establishes the authority for the Board and sets out the scope of practice for RNs. The Practice Act is located in the Business and Professions Code starting with Section 2700. Regulations to implement the law appear in Title 16, Division 14, of the California Code of Regulations.

As nursing practice and health care evolve, the public relies on the Board in its role as patient advocate to ensure that registered nursing activities are performed in a safe manner by qualified individuals.

Public Served

The Board is responsible for regulating the practice of the following population (statistics as of 3/31/04):

 45,000 Public Health Nurses 12,500 Nurse Practitioners 9,300 Nurse Midwife/Practitioner Furnishing Numbers 1,800 Nurse Anesthetists 1,100 Nurse Midwives 400 Psychiatric/Mental Health Nurses 1,900 Clinical Nurse Specialists 	306,000	Registered Nurses
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400 Psychiatric/Mental Health Nurses	1,800	Nurse Anesthetists
5	1,100	Nurse Midwives
1,900 Clinical Nurse Specialists	400	Psychiatric/Mental Health Nurses
	1,900	Clinical Nurse Specialists

Approximately 39,200 applicants seek licensure or certification with the Board annually. Initial RN licensure requires completion of education, a national computerized examination, and a criminal background check. RNs licensed in other states can apply for endorsement in California.

The Board also regulates and approves 131 pre-licensure and advanced practice nursing education programs, and it registers and approves 3,400 continuing education providers.

In addition to its licensees, certificate-holders, and registrants, the Board's customers include consumers, employers, health care organizations, and other agencies and groups interested in nursing regulation. The Board strives to educate the public through wide dissemination of information. In March 1999, the Board's Web site went "live" at www.rn.ca.gov. In July 2001 the Board was able to provide

online license verifications for RNs and Continuing Education Providers. If additional information is needed on a disciplinary action, the requestor is able to contact the office during regular business hours. The information is updated on a daily basis on business days to reflect any status changes. The Board also developed Nurse Web site, www.nurse.ca.gov, which assists in the recruitment and retention of registered nurses and links to other sites providing information about the profession of registered nursing.

The Board continues to provide brochures and videos, and a toll free 24-hour telephone license verification system. Additionally, 2,200 complaints about licensees are received and investigated each year, with the public readily accessing the complaint unit by telephone, mail, and computer or in person.

In January 2001 the Board became the first California licensing agency to offer online professional license renewal and pay the renewal fee with a credit card through the Internet. Since that time this system has been updated and an RN can now change their address of record, renew advance practice certificates, request duplicate licenses, and begin the application process for endorsing their license from another state to California.

Board Structure and Sunset Status

The Board of Registered Nursing is one of several professional licensing boards that exist within the Department of Consumer Affairs. As a special-fund agency, the Board's annual budget is fully funded through licensee fees.

Nine board members serve as the policy-setting body for the Board. Seven of the members are appointed by the Governor, one by the Senate President Pro Tempore, and one by the Assembly Speaker. Board members include five registered nurses, one physician, and three public members.

The Joint Legislative Sunset Review Committee completed its review of the Board of Registered Nursing in April 2003 and recommended continuation of the Board and extension of the next sunset review until July 2008. That recommendation was enacted into law effective January 2004.

EXTERNAL/INTERNAL ASSESSMENT

To build a sound foundation for its strategic planning, the Board conducted a comprehensive assessment of internal and external factors that the Board faces. Following is a summary of the steps taken.

Environmental Scan of Trends and Factors

The staff task force conducted extensive research and interviewed experts to identify the key issues that are likely to affect the success and direction of the Board in the next three to five years. Managers and Board Members were included in this process.

This external scan yielded key trends and factors that the Board must anticipate and address in its strategic plan. These trends and factors represent the issues that may become opportunities, threats, or a basis for needed action for the Board. Eight categories emerged for the environmental scan: Demographic/Socioeconomic, Technology, Enforcement, Political and Regulatory, Nursing Shortage, Nursing Practice, Nursing Education, and Advanced Practice Nursing.

Stakeholder Identification and Feedback

The Board identified the various groups, organizations, and individuals that are affected by the Board, have a vested interest in the Board, have expectations of the board, or could affect the ability of the Board to succeed in its mission. Feedback from stakeholders is obtained on a continuing basis through periodic surveys, telephone interviews, meetings, liaison activities, and public forums. This exchange of information provides information concerning the Board's effectiveness, satisfaction with services, improvements needed, and future trends anticipated.

Stakeholder identification and feedback is fundamental to creating a meaningful and complete assessment of external issues and expectations. A listing of key stakeholders appears on the next page.

Internal Assessment

To be prepared to fulfill its mission, the Board must have a strong and effective work force. To that end, the Board conducted confidential surveys of employees in 1994, 1997, and 2004 to learn their level of satisfaction and recommendations for improvements. The results were positive overall, and very constructive feedback was obtained. The management team continues to solicit employee feedback as a basis for changes and improvement.

BOARD OF REGISTERED NURSING KEY STAKEHOLDERS

Individuals:

Consumers

Registered Nurses

Registered Nurse students and applicants

Employers of RNs

Healthcare practitioners

BRN Employees

Organizations:

Nursing organizations and associations

Health care related organizations

National Council of State Boards of Nursing

Nursing education programs

Colleges and Universities

Contractors providing services to the Board

Government Entities:

Governor's Office

Legislature

Department of Consumer Affairs

State Oversight Agencies

Division of Investigation (DCA)

Office of Attorney General

Office of Administrative Hearings

Health-related Governmental agencies

PERFORMANCE MEASURES

Performance Appraisal Through Sunset Review

Extensive performance measures were established by the Legislature for the Board pursuant to a mandated sunset review process.* The Board submitted its second Sunset report to the Legislature setting out its quantified results for the previous six fiscal years. The measures covered all Board services including licensure, certification, examination, continuing education, enforcement, and diversion programs. The Joint Legislative Sunset Review Committee evaluated and approved the Board's performance report in April 2003, and recommended extension of the next sunset review until July 2008. That recommendation was enacted into law effective January 2004.

This performance review through the sunset process served as an important component of the Board's strategic planning process. All of the performance measures that were set out in the Legislative mandate were reflected in the Board's strategic goals and objectives. Those performance measures continue to serve as benchmarks for the Board.

Addition Performance Appraisal

Key indicators of Board accomplishments are reported annually in the Departmental Agency Statistical Profile. This invaluable tool permits the Board to measure its progress against prior years in critical areas such as enforcement outcomes and public outreach. All boards and programs employ common definitions, which standardizes the data for comparative purposes.

Another important way that the Board tracks its performance is through the annual reports of accomplishments that each Board sub-committee presents at public Board meetings. The committees cover all Board program areas: Diversion/Discipline, Education/Licensing, Nursing Practice, and Legislative. The Board will track and monitor outcomes, update and refine performance measures, and modify its strategic plan on a continuous basis.

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^{*} Business and Professions Code Sections 101.1 and 473

BUDGET AND STAFFING

The Board of Registered Nursing is a self-supporting special fund agency which does not receive any general funds, federal funds, or other funds. Budgeted funding (prior to reimbursements) for the Board is as follows:

2002/2003	15,141,000	(actual expenditure)
2003/2004	16,716,000	(projected expenditure)
2004/2005	15,743,000	(Governor's Budget)

Staffing totals are presented below in terms of full-time equivalent (FTE) positions:

2002/2003	89	FTE
2003/2004	80.3	FTE
2004/2005	80.3	FTE

RESOURCE ASSUMPTIONS

The Board of Registered Nursing intends to accomplish its strategic plan's goals, objectives, and performance targets within its existing fee structure and fund condition.

The Board's resource allocation is in keeping with its primary mission to protect the health and safety of consumers. To that end, over 70% of the Board's budget is devoted to enforcement activities.

The BRN has maintained fiscal viability and stability while performing its functions and maintaining fees at the minimum statuary levels. In 2001/02 the Board had a sufficient reserve fund of 13.8 months. However, as a result of a \$12 million loan to the General Fund to assist in offsetting the General Fund shortfall, the reserve declined dramatically to 5.7 months in fiscal year 2002/03.

On August 11, 2003, the Board submitted the Personal Service Reduction plan totaling \$579,498 with a net reduction of 8.7 positions. These reductions were based on Control Section 4.10 and the following reflect the 8.7 positions that were lost: 1 nursing education consultant, 1 associate governmental program analyst, 2.7 staff services analysts, 1 management services technician, 2.5 office technicians, and .5 office assistant. Additionally, the Board furloughed two retired annuitants who assisted in the cashiering and microfilm units in the Sacramento office. The Board also had to separate a part time intermittent office assistant in the South El Monte office.

In fiscal year 2002/03 the Board lost an additional 6 positions due to Control Section 31.6. This resulted in the lost of 2 nursing education consultants, 2 office services supervisors, and 2 office assistants. Since the Board has lost 14.7 PYs the Board has reduced numerous services. For example, telephone hours for the licensing program have been reduced to 9:00 AM – 3:00 PM and Nursing Consultants only take telephone inquires 3 days a week. The Board has reduced its Board Meetings from 5 times to 4 times a year, which can delay enforcement actions. The Board has suspended the publication of its newsletter that provides practice alerts and other key information for RNs, and has suspended the publication of its laws and regulations.

In fiscal year 2003/04 the Department of Finance approved a BRN budget change proposal to continue to conduct a biannual survey research to assist with RN workforce building and expansion. This research was mandated by AB 1140 (Chapter 1089, Statutes 2002).